PART B - FEE(S) TRANSMITTAL Complete and send the form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 MAR 1 5 2006 or Fax (571) 273-2885 INSTRUCTIONS: This arm should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected before the patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 23117 7590 12/19/2005 NIXON & VANDERHYE, PC Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203 (Depositor's (Signature (Date FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. 10/022,830 12/20/2001 2380-589 1508 TITLE OF INVENTION: CONTROLLING TRANSMISSION OF CELL INFORMATION BETWEEN CONTROL NODES IN RADIO ACCESS NETWORK APPLN, TYPE SMALL ENTITY **ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 03/20/2006 **EXAMINER** ART UNIT **CLASS-SUBCLASS** NGUYEN, DAVID Q 2681 455-450000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list INIXON & VANDERHYE, (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ĞZ1 €. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) (B) RESIDENCE: (CITY and STATE OR-GOLDTRY) 1400.09 OP (A) NAME OF ASSIGNEE 300.00 OP Sweden1504 03 FU:8001 TELEFONAKTIEBOLAGET LM ERICSSON (publ) Stockholm, 12.00 OP Please check the appropriate assignce category or categories (will not be printed on the patent): \square Individual \boxtimes Corporation or other private group entity \square Government 4a. The following fec(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. \square The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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March 15, 2006

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H. Warren Burnam, Jr.

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